	JUL. 8. 2005 JUL 0 8 2005	11:38AM BSH.	ITR. 252. 672 PART B-	-4523 fee(s) tra i	NSMITTAL	NO. 514	P. 2
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03 FC:80	01 9.00 DA APPLICATION NO.	FILING DATE	FIF	FIRST NAMED INVE		ATTORNEY DOCKET NO.	CONFIRMATION NO.
1	10/813,385	03/29/2004 AS-HEATED DISHWASH	ER	Ulrich Deiss		ZTP01P13013	7626
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·	Perrin, Joseph L		1746		134-05700D	_	
. ,	CFR 1.363)	e address or indication of "F lence address (or Change of 22) attached.	I	(1) the names of or agents OR, alto	the patent front page, up to 3 registered pare emadicely, single firm (baving as	eng arromeys	N I WINBU

registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3 CRAIR J. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)

MENS MUNICH, GERMANY Please check the appropriate assignes carrigory or categories (will not be printed on the parent): Individual Corporation or other private group entity Government 4b, Payment of Fcc(s): 4a. The following fee(s) are enclosed: A check in the amount of the fee(s) is enclosed. Ksvo Fee Dayment by credit card. Form PTO-2038 is attached. Lyblication Fee (No small entity discount permitted) The Director is hereby authorized by charge the required fce(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.
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CERTIFICATE OF FACSMILE TRANSMISSION

I hereby certify that the Part B - Fees Transmittal Form PTOL-85 is being faxed herewith to: Mail Stop Issue Fee, Commissioner for Patents, PO Box 1450, Alexandria VA 22313-1450 at (703) 746-4000 on the date shown below.

Respectfully submitted,

Russell W. Warnock

Name of Person Signing under 37 CFR 1.34

Registration No. 32,860

Senior Intellectual Property Counsel BSH Home Appliances Corporation 100 Bosch Boulevard

New Bern, NC 28562 Phone: 252-672-7927

714-845-2807 Fax:

russell.warnock@bshg.com

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